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UTILITY	
PATENT APPLICATION	NC
TRANSMITTAL	

Attorney Docket No. H0610.0002/P002 First Inventor Sven I. Hommeltoft

TRANSMITTAL	Title	METHOD AND APPARATUS FOR, etc.			
(Only for new nonprovisional applications under 37 CFR 1 53(b))	Expres	s Mail Label No.			
APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application con	ntents.	Box Patent Application ADDRESS TO: Box Patent Application Commissioner for Patents Washington, DC 20231			
1. X Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original, and a duplicate for fee processing) 2. Applicant claims small entity status See 37 CFR 1.27. 3. X Specification [Total Pages 1^o]	7. CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix) 8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. Computer Readable Form (CRF) b. Specification Sequence Listing on: i. CD-ROM or CD-R (2 copies); or ii. paper			
- Statement Regarding Fed sponsored R & D - Reference to sequence listing, a table, or a computer program listing appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (if filed) - Detailed Description	-	i. CD-ROM or CD-R (2 copies); or ii. paper c. Statements verifying identity of above copies **CCOMPANYING APPLICATIONS PARTS** 9. X Assignment Papers (cover sheet & document(s))			
- Claim(s) - Abstract of the Disclosure	3 1	10. 37 CFR 3 73(b) Statement Power of Attorney 11. English Translation Document (if applicable)			
5. Oath or Declaration [Total Pages 4	==	12. Information Disclosure Copies of IDS Statement (IDS)/PTO-1449 Citations			
a. X Newly executed (original or copy)		13. Preliminary Amendment			
b. Copy from a prior application (37 CFR 1.63(d)) (for continuation/divisional with Box 18 completed) 14. X Return Receipt Postcard (MPEP 503) (Should be specifically itemized) 15. V Certified Copy of Priority Document(s)					
i. DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).		X Certained Copy of Printing Document(s) (if foreign priority is claimed) Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.			
•		17. Other:			
6. Application Data Sheet. See 37 CFR 1.76					
18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:					
Continuation Divisional Continuation-in-part (CIP) of prior application No.:					
Prior application information: Examiner		Group / Art Unit:			
under Box 5b, is considered a part of the disclosure of the acco	mpanying	of the prior application, from which an oath or declaration is supplied continuation or divisional application and is hereby incorporated by			
reference. The incorporation <u>can only</u> be relied upon when a portion has been inadvertently omitted from the submitted application parts. 19. CORRESPONDENCE ADDRESS					
X Customer Number or Bar Code Label		X Correspondence address below 24998			
DICKSTEIN SHAPIRO MORIN Stephen A. Soffen	& OSH	HINSKY LLP			
Address 2101 L Street NW					
City Washington Sta	e	DC Zip Code 20037-1526			
Country US Tele	ephone	(202) 785-9700 Fax (202) 887-0689			
Name (Print/Type) Stephen A. Soffen / Registration No. (Attorney/Agent) 31,063					
Signature Steph 4	10/	Date January 24, 2002			

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FFF TRANSMITTAL		Complete if Known							
FEE TRANSMITTAL			Application Number			Not Yet Assigned			
for FY 2002 Filing Date				Herewit	1-	a o			
Patent fees are subject to annual revision,	First Named Inventor			entor	Sven I.	Hommeltoft	20		
	_	Exar	niner i	Name		Not Yet	Assigned	ω. 	
Application claims small entity status See 37 CFR 1.27 Group Art Unit				N/A		<u>-8</u>			
TOTAL AMOUNT OF PAYMENT (\$) 780.00		Attor	ney D	ocket N	lo.	H0610.0	0002/P002	128	
METHOD OF PAYMENT (check all that apply)	T			FEI	E CALCU	LATION (continued)	<u>.</u>	
X Check Credit Money Order Other None	3. A	DDIT	IONA	L FEES					
X Deposit Account	ł								
Deposit		Entity	Sma	ll Entity	·				
Account Number 04-1073	Fee Code	Fee (\$)	Fee Code	Fee (\$)		Fee Des	cription		
Deposit Dickstein Shapiro Morin &			İ					Fee Paid	
Account Name Oshinsky LLP	105	130	205	65		e – late filing f			
The Commissioner is hereby authorized to: (check all that apply)	127	50	227	25	Surcharge sheet	- late provis	ional filing fee or cover		
X Charge fee(s) indicated below X Credit any overpayments	139	130	139	130	Non-Englis	sh specificati	on		
X Charge any additional fee(s) during the pendency of this application	147	2,520	147	2,520			parte reexamination		
Charge fee(s) indicated below, except for the filling fee	112	920*	112	920*	Requesting	g publication	of SIR prior to		
to the above-identified deposit account.	113	1,840*	113	1,840*	Examiner : Requesting	g publication	of SIR after		
FEE CALCULATION	115	110	215	55	Examiner a Extension		in first month		
1. BASIC FILING FEE	116	400	216	200			in second month		
Large Entity Small Entity	117	920	217	460			in third month		
Fee Fee Fee Fee Fee Description Fee Paid	118	1,440	218	720			in fourth month		
101 740 201 370 Utility filing fee 740.00	128	1,960	228	980	Extension				
106 330 206 165 Design filing fee	119	320	219	160	Notice of A				
107 510 207 255 Plant filing fee	120	320	220	160	Filing a brid				
108 740 208 370 Reissue filing fee	121	280	221	140	Request fo				
114 160 214 80 Provisional filing fee	138	1,510	138	1,510			blic use proceeding		
SUBTOTAL (1) (\$) 740.00	140	110	The state of the s						
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE	141 142	1,280	241	640		revive - unint			
Extra Fee from Foo Poid	143	1,280	242	640		fee (or reiss	ue)		
Total Claims 6 -20** = x = 0.00	143	460	243	230	Design issu				
Independent 2 3** - 0 00	122	620 130	244 122	310	Plant issue				
Claims 2 -3** = X = 0.00 Multiple Dependent				130		the Commis	1		
	123	50	123				CFR 1.17(q)	[]	
Large Entity Small Entity Fee	126	180	126				on Disclosure Stmt		
Code (\$) Code (\$) Fee Description	581	40	581	40	property (tir	mes number	ssignment per of properties)	40.00	
103	146	740	246	270	Filing a sub	mission after	final rejection		
104 280 204 140 Multiple dependent claims in excess of 3	149	740	249	370	(37 ČFR 1 129(a)) For each additional invention to be				
109 84 209 42 ** Reissue independent claims	179	740	279		examined (37CFR 1.129	(b)) Examination (RCE)		
over original patent	169	900	169	900	Request for	expedited ex			
110 18 210 9 ** Reissue claims in excess of 20 and over original patent		ı			of a design	application	-		
Other fee (specify) SUBTOTAL (2) (\$) 0.00 *Reduced by Basic Filing Fee Paid SUBTOTAL (3						TAI /3 (e)	40.00		
**or number previously paid, if greater, For Reissues, see above **Reduced by Basic Filing Fee Paid **SUBTOTAL (3 (\$) 40.00									
SUBMITTED BY Complete (if applicable)									
Name (Print/Type) Stephen A. Soffen	Registration No. (Attorney/Agent) 31,063					Telephone			
Signature Stop CAM	-	igein)			•	Date	January 24, 200	2	